

CLAIM AMENDMENTS

1-17. (Cancelled)

18. (Currently Amended) A method of treating ~~tissue having a thickness~~ an organ having a wall thickness with opposing surfaces, comprising:

placing one of an ablative element and a ground element in a first location adjacent ~~the tissue~~ one of the opposing surfaces;

placing another of the ablative element and the ground element in a second location adjacent ~~the tissue~~ another of the opposing surfaces; and

delivering ablation energy through the ~~wall thickness of the tissue~~ between the ablative and ground elements.

19. (Currently Amended) The method of claim 18 34, wherein the first and second locations are different chambers of a heart, and ~~the tissue is a wall~~ is between the different chambers.

20-23. (Cancelled)

24. (Currently Amended) The method of claim 18 34, wherein the first location is a chamber of a heart, the second location is a coronary sinus of the heart, and ~~the tissue is a wall~~ is between the heart chamber and coronary sinus.

25-28. (Cancelled)

29. (Original) The method of claim 18, wherein the one of the ablative element and ground element is intravascularly placed in the first location, and the other of the ablative element and ground element is intravascularly placed in the second location.

30. (Original) The method of claim 18, wherein the one of the ablative element and ground element is intravascularly placed in the first location, and the other of the ablative element and ground element is extravascularly placed in the second location.

31. (Currently Amended) The method of claim 18, wherein the ~~tissue comprises~~ organ tissue is hollow.

32. (Currently Amended) The method of claim 31, wherein the ~~first location is on opposing surfaces are~~ an epithelial surface of an organ, and the ~~second location is on~~ an endothelial surface of the organ.

33. (Currently Amended) The method of claim 31, wherein both of the ~~first and second locations are on an opposing surfaces are~~ endothelial surfaces of the organ.

34. (Currently Amended) The method of claim 18, wherein the ~~tissue comprises~~ organ is a heart tissue.

35. (Currently Amended) The method of claim 34, wherein the ~~first location is on an opposing surfaces are respectively an epicardial surface of a heart, and the second location is on an endothelial endocardial surface of the heart.~~

36. (Currently Amended) The method of claim 34, wherein both of the ~~first and second locations are on an opposing surfaces are~~ endocardial surfaces of a heart.

37. (Original) The method of claim 18, further comprising maintaining a delivery of ablation energy until a desired lesion is formed.

38. (Original) The method of claim 37, wherein the desired lesion is a transmural lesion.

39. (Cancelled)

40. (Currently Amended) A method of treating tissue having a thickness an organ having a wall thickness with opposing surfaces, comprising:

placing one of an ablative element and a ground element in a first location adjacent ~~the tissue~~ one of the opposing surfaces;

placing another of the ablative element and the ground element in a second location adjacent ~~the tissue~~ another of the opposing surfaces;

applying suction to the ~~tissue~~ wall thickness to stabilize the one of the ablative element and the ground element against the ~~tissue~~ one of the opposing surfaces; and

delivering ablation energy through the wall thickness ~~of the tissue~~ between the ablative and ground elements.

41. (Currently Amended) The method of claim 40 48, wherein the first and second locations are different chambers of a heart, and ~~the tissue is a wall is~~ between the different chambers.

42. (Currently Amended) The method of claim 40 48, wherein the first location is a chamber of a heart, the second location is a coronary sinus of the heart, and ~~the tissue is a wall is~~ between the heart chamber and coronary sinus.

43. (Previously Presented) The method of claim 40, wherein the one of the ablative element and ground element is intravascularly placed in the first location, and the other of the ablative element and ground element is intravascularly placed in the second location.

44. (Previously Presented) The method of claim 40, wherein the one of the ablative element and ground element is intravascularly placed in the first location, and the other of the ablative element and ground element is extravascularly placed in the second location.

45. (Currently Amended) The method of claim 40, wherein the ~~tissue comprises~~ organ tissue is hollow.

46. (Currently Amended) The method of claim 45, wherein the ~~first location is on opposing surfaces are an epithelial surface of an organ, and the second location is on an endothelial surface of the organ.~~

47. (Currently Amended) The method of claim 45, wherein both of the ~~first and second locations are on an opposing surfaces are~~ endothelial surfaces of the organ.

48. (Currently Amended) The method of claim 40, wherein the ~~tissue comprises~~ organ is a heart-tissue.

49. (Currently Amended) The method of claim 40, wherein the ~~first location is on an opposing surfaces are respectively an epicardial surface of a heart, and the second location is on an endothelial endocardial surface of the heart.~~

50. (Currently Amended) The method of claim 40, wherein both of the ~~first and second locations are on an opposing surfaces are~~ endocardial surfaces of a heart.

51. (Previously Presented) The method of claim 40, further comprising maintaining a delivery of ablation energy until a desired lesion is formed.

52. (Previously Presented) The method of claim 51, wherein the desired lesion is a transmural lesion.

53. (Previously Presented) A method of treating the heart of a patient, comprising:
percutaneously introducing one of an ablative element and a ground element through a chest of the patient into contact with the epicardial surface of the heart;

intravascularly introducing another of the ablative element and the ground element into contact with a endocardial surface of the heart; and delivering ablation energy through the myocardial tissue of the heart between the ablative and ground elements.

54. (Previously Presented) The method of claim 53, further comprising maintaining a delivery of ablation energy until a desired lesion is formed.

55. (Previously Presented) The method of claim 54, wherein the desired lesion is a transmural lesion.

56. (Previously Presented) The method of claim 53, further comprising applying suction to the epicardial tissue to stabilize the one ablative element and the ground element against the epicardial tissue.

57. (Previously Presented) The method of claim 53, further comprising placing a cannula through the chest, wherein the one of the ablative element and the ground element is introduced through the cannula into contact with the epicardial tissue.

58. (Previously Presented) The method of claim 53, further comprising:
percutaneously introducing one or more mapping elements through the chest into contact with the epicardial surface; and
mapping the heart with the one or more mapping elements.

59. (New) The method of claim 18, wherein the one of the ablative element and ground element is placed in contact with the one of the opposing surfaces, and the other of the ablative element and ground element is placed in contact with the other of the opposing surfaces during delivery of the ablation energy.

60. (New) The method of claim 40, wherein the one of the ablative element and ground element is placed in contact with the one of the opposing surfaces, and the other of the ablative element and ground element is placed in contact with the other of the opposing surfaces during delivery of the ablation energy.